

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>CH</i>	<i>1020</i>	<i>2/16</i>
RESPONSE FORMALITY REVIEW	<i>A</i>	<i>676</i>	<i>06/30/01</i>

### INDEX OF CLAIMS

✓ ..... Rejected                      N ..... Non-elected  
 = ..... Allowed                        I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted                      O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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*EW*  
*4/4/01*